1708 - 1811 - 21076

FEC FORM 3X

Use

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FE6AN026

REPORT OF RECEIPTS

For Other Than An Authorized Committee

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2814 OCT 20 AMy 8: 38

FEC FORM 3X

Rev. 12/2004

NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If ty over the lines		12FE4M5 MA	ECENTER
Worte Out Incumbents For Democracy					
ADDRESS (number and street)	PO BOX	1,2,7,1			
Check if different than previously reported. (ACC)	Spring	Biranich		T.X 17.8:	0.7.01-14.9.021
2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲					
C 0,6,4,23,4	.6.7]	3. IS THIS REPORT	NEW (N) OR	AMENDEI (A)	
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2) Mar 20 (M3)	May 20 (M5)	Aug 20 (M8	Year Only)
(a) Quarterly Reports:	Dug Cit.	Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M1)	(Non-Election Year Only)
April 15 Quarterly Report (July 15 Quarterly Report (October 15 Quarterly Report ((Q2) (C) 12-Day PRE-Electi Report for	[2007]	Section 2	General (12G) Special (12S)	Runoff (12R)
January 31 Year-End Report		Election on	/ 640 /		in the State of
July 31 Mid-Year Report (Non-elect Year Only) (MY)	ion (d) 30-Day POST-Elec	the Control	30G)	Runoff (30R)	Special (30S)
Termination Repo		Election on	/ 676 /	~~~~	in the State of
5. Covering Period 0.7 01 2014 through 0.9 30 2014					
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer David R. Remark					
Signature of Treasurer	Jarif R.	Renner	Da	ate (1.0)	4/2014
NOTE: Submission of false, erro	oneous, or incomplete info	ormation may subject the	person signing thi		Ities of 2 U.S.C. §437g.